PART B - FEE(S) TRANSMITTAL

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLICATION NO.	01/18/2002	Martin Caldwell	A-2136-AL	8404

TITLE OF INVENTION: HAND ACCESS PORT DEVICE

ARREST MARK	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	08/03/2004
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Address form PTO/SB/	dence address (or Change of C 122) attached.	опекропоелсе	firm (having as a member a registered	t attorney or 2 Kenne:	th K. Vu
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

APPLIED MEDICAL RESOURCES CORPORATION.

RANCHO SANTA MARGARITA, CALIFORNIA

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(Authorized Signature)	(Date) 7/29/09
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Caldwell, et al.

Serial No.

10/052,297

Filed:

January 18, 2002

For:

HAND ACCESS PORT DEVICE

Dear Sirs;

Docket No. AUS-2136-AL

CUSTOMER NO. 21378

CONFIRMATION No.: 8404

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office (Fax No. (703) 746-4000 on August 2, 2004

planon

Barbara Johnson (Type or print name)

Attached please find the following documents submitted for filing in reference to the above-captioned application.

1. Fee Transmittal (Part B) (1 original, 1 copy)

Respectfully submitted,

Barbara Johnson

Applied Medical Resources

CUSTOMER NO.: 21378

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